

## UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA

## TRANSCRIPT DESIGNATION AND ORDERING FORM

Please read instructions.

RECEIVED

1. NAME <b>Christopher Weaver</b>		2. PHONE NUMBER <b>212-416-4084</b>		3. DATE <b>12/11/2018</b>	
4. MAILING ADDRESS <b>1211 Avenue of the Americas</b>		5. E-MAIL ADDRESS <b>christopher.weaver@wsj.com</b>		6. CITY <b>New York</b>	
8. ZIP CODE <b>10036</b>		9. JUDGE <b>Morris</b>		7. STATE <b>NY</b>	
11. U.S. DISTRICT COURT CASE NUMBER <b>4:18-cr-00014-BMM</b>			10. CASE NAME <b>USA v. Weber</b>		
12. COURT OF APPEALS CASE NUMBER					

13. ORDER FOR

<input type="checkbox"/> APPEAL	<input checked="" type="checkbox"/> CRIMINAL	<input type="checkbox"/> CRIMINAL JUSTICE ACT	<input type="checkbox"/> BANKRUPTCY
<input type="checkbox"/> NON-APPEAL	<input type="checkbox"/> CIVIL	<input type="checkbox"/> IN FORMA PAUPERIS	<input type="checkbox"/> OTHER - Specify

14. TRANSCRIPT REQUESTED - Specify portion(s) and date(s) of proceeding(s) for which transcript is requested.

PORTIONS	DATE(S)	REPORTER	PORTIONS	DATE(S)	REPORTER
Change of Plea			Closing Argument - Plaintiff	9/6/18	Y. Heinze
Pre-trial Proceeding			Closing Argument - Defendant	9/6/18	Y. Heinze
Voir Dire			Settlement Instructions		
Opening Statement - Plaintiff	9/4/18	Y. Heinze	Jury Instructions		
Opening Statement - Defendant	9/4/18	Y. Heinze	Sentencing		
Testimony - Specify Witness Fred Gayton DJ Martin	9/5/18 9/5/18	Y. Heinze Y. Heinze	Other - Specify		

15. ORDER

CATEGORY	ORIGINAL Includes certified copy to clerk for records of the Court	FIRST COPY to each party	ADDITIONAL COPIES to same party	FORMAT REQUESTED Each format is billed as a separate transcript copy.	
				Paper	Electronic Specify File Format
30-Day (Ordinary)	\$3.65/page <input type="checkbox"/>	\$ .90/ page <input type="checkbox"/>	\$ .60/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input type="checkbox"/> <input type="checkbox"/> A-Z word index
14-Day	\$4.25/page <input checked="" type="checkbox"/>	\$ .90/page <input type="checkbox"/>	\$ .60/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input checked="" type="checkbox"/> <input type="checkbox"/> A-Z word index
7- Day	\$4.85/ page <input type="checkbox"/>	\$ .90/ page <input type="checkbox"/>	\$ .60/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input type="checkbox"/> <input type="checkbox"/> A-Z word index
3- Day	\$5.45/ page <input type="checkbox"/>	\$1.05/ page <input type="checkbox"/>	\$ .75/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input type="checkbox"/> <input type="checkbox"/> A-Z word index
DAILY	\$6.05/page <input type="checkbox"/>	\$1.20/ page <input type="checkbox"/>	\$ .90/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input type="checkbox"/> <input type="checkbox"/> A-Z word index
HOURLY	\$7.25/page <input type="checkbox"/>	\$1.20/ page <input type="checkbox"/>	\$ .90/page <input type="checkbox"/>	<input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index	<input type="checkbox"/> ASCII PDF <input type="checkbox"/> <input type="checkbox"/> A-Z word index

16. & 17. CERTIFICATE OF SERVICE, DISTRIBUTION and PAYMENT

E-file this form with the clerk's office, mail to opposing counsel if they are not electronic filers and serve the court reporter.  
If payment is authorized under CJA, complete CJA 24 form through box 15 and attach to this order when e-filing.  
Financial arrangements must be made with the court reporter before transcript is prepared.

I certify that this form has been served on the court reporter this date: \_\_\_\_\_ Attorney signature: \_\_\_\_\_